



Docket No. 61248-A/JPW/AJM/BJA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Gregory B. Wilson and R. Riley Shuler  
Serial No. : 09/776,010 Examiner: Bao Qun Li  
Filed : February 2, 2001 Group Art Unit: 1648  
For : HUMAN HERPESVIRUS 6A AND 6B TRANSFER FACTORS FOR THE  
TREATMENT OF CHRONIC FATIGUE SYNDROME AND MULTIPLE SCLEROSIS

Mail Stop RCE  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: February 14, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

       A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	11 -	* 20 =	*** 0 X	\$25	\$50	=	0	
Independent Claims	4 -	** 4 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time <u>      </u> Yes <u>X</u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE			\$ 0	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter  
Page 2

The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter

☒ Return Receipt Postcard

☐ An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes ☐ No ☐

and a fee of \$ ☐ included)

☒ A Petition for an Extension of Time, including a fee of  
\$ 1080.00 for a Petition for 5 Month(s) Extension of Time

☒ Other (identify): Request for Continued Examination

THE TOTAL FEE DUE IS \$ 1475.00


☒ A check in the amount of \$ 1475.00 is enclosed.


☐ Please charge Deposit Account No. ☐ in the amount of  
\$ ☐

☒ The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

☒ Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
☐ Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

  
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I hereby certify that this  
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Alan J. Morrison Date  
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